

EXHIBIT 16

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Aracelis Ocasio Maldonado
Participant's Address: HC-83 Box 7173, Vega Alta, PR 00692
Participant's Email Address: aracocio@gmail.com
Name of Counsel: _____
Address of Counsel: _____
Email Address of Counsel: _____

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: No. 28351
Nature of Claim: Compensation for years of service
By: Aracelis Ocasio Maldonado
Signature
Aracelis Ocasio Maldonado
Print Name
Retirada del Municipio Vega Alta
Title (if Participant is not an individual)
25 / august / 2021
Date

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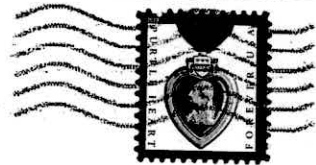
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Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Aracelis Ocasio Maldonado
Hr-83 Box 7173
Vega Alta, PR 00692

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